



County of the Soke of Peterborough

LIB 7

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER

FOR THE YEAR

1964

G. NISBET, M.B., Ch.B.(Ed.), D.P.H., R.C.S.(Ed.)

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To the Chairman and Members of the
County Council for the Soke of Peterborough.

My Lord, Ladies and Gentlemen,

I have the honour to present my 17th Annual Report on the health services in the Soke of Peterborough.

On the 1st April, 1965, the counties of the Soke of Peterborough and Huntingdonshire were combined, so that this is the last annual health report to be presented, dealing with the former Soke of Peterborough County Council.

To me falls the unique honour of having been the only full-time County Medical Officer of that Authority. My one and only predecessor (the late Dr. Christopher Rolleston who was appointed in 1912) held the post as a joint appointment with the County of Rutland. Upon his retirement in 1948, I was appointed as full-time County Medical Officer to the Soke of Peterborough. Also, during the past 52 years, the County has had only two County Medical Officers, which is, again, something unique, the only two in the County's history.

When the first part-time County Medical Officer took up his appointment in 1912, the population of the County was 45,101; it is now nearly 80,000. The infant mortality rate was 111.8, compared with 27.3 in 1964, and it was as low as 12.9 in 1962. The illegitimate mortality rate in 1912 was 330 per thousand, only two of every three surviving. Last year it was 22.5.

In 1914, a house (28, Fitzwilliam Street) was rented as a Tuberculosis Dispensary, at an annual rent of £36 a year. This house continued as the T.B. Dispensary, V.D. Clinic, and the only headquarters and office of the County Medical Officer, in Peterborough, until 1948, although Dr. Rolleston had his main office at Ketton, in the County of Rutland.

The Public Health Committee came into being in 1914, as a small Committee, known as the "Dispensary House Committee". It was formed to deal particularly with matters affecting tuberculous patients, purchasing fittings, curtains, etc. Originally, the Minutes of the Dispensary House Committee were written and kept in a sixpenny exercise book, by the former County Medical Officer. The Dispensary House Committee was the forerunner of a Committee, formed some years later, and known as the Public Health Committee, which met once a month, and dealt with all county health matters, although the principal business was assessing parental or family contributions towards the cost of maintenance in sanatoria or other institutions, of dependent relatives.

Eventually, as more and more work devolved upon the local Health Authority, the Committee was split into two sections, the business having become too unwieldy to be dealt with at one meeting, a separate meeting being called to deal with the work of the Health Visitor - mainly Maternity and Child

Welfare matters. These arrangements continued until the coming into operation of the National Health Service Act in 1948, when Health and Welfare matters were dealt with at five Sub-Committees, reporting to a County Health Committee, all of which met monthly.

My duties as County Medical Officer have changed very considerably since I was first appointed. In the early days, in Peterborough, I did a great amount of clinical work, being responsible for all the Tuberculosis cases and Venereal Diseases Clinics, both male and female, the administration of the "Gables" Maternity Hospital, the clinical care of patients in the St. John's chronic sick wards, and, from April 1st, 1949 to March 31st, 1950, for all the infectious disease admitted to the Peterborough Isolation Hospital.

A typical day began with a visit to the Gables Maternity Hospital - on to St. John's Close and Hospital - then spending an hour in the office, and at 11 a.m. going to the T.B. Dispensary to carry out artificial pneumothorax refills, and the examination of T.B. patients. In the afternoon, there would be visits to the homes of tuberculous patients, followed by a V.D. clinic, often going on until 9.00 p.m., especially on Saturday evenings, when cases had travelled in from the neighbouring townships. In between times, and always last thing at night, one had to visit the Isolation Hospital, for, in those days, infectious disease was far more prevalent than now. During the late summer and autumn of 1949, for instance, an outbreak of poliomyelitis occurred in the area. Fifty-seven cases were admitted to the hospital, though all were not confirmed. The "iron-lung" of those days, was in constant use.

In 1948, 635 A.P. refills were carried out, and 453 patients attended the V.D. Clinic during that year, making a total of 3,176 attendances. Changed days, indeed, in Public Health.

Population - 1964:

According to the Registrar-General's estimate, the population of the County increased by 1,660, the estimated population for mid-1964, being 79,680, compared with 78,020 in mid-1963.

Statistics:

The following statistics show at a glance, the birth rate, death rate, infant mortality rate, etc., for 1964, compared with recent years:

	<u>1964</u>	<u>1963</u>	<u>1962</u>	<u>1961</u>
Birth Rate	20.2	19.5.	18.9	18.9
Death Rate	9.6	11.2	10.3	10.3
Infant Mortality Rate	27.3	20.3	12.9	17.3
Maternal Death Rate	0.0	0.0	0.66	0.0
Tuberculosis Death Rate	0.01	0.0	0.05	0.01
Cancer Death Rate	2.0	1.8	1.8	1.7

The birth rate of 20.2 per 1000 of the population is the highest since 1960, when it was 20.5, and compares with a birth rate of 18.4 for England and Wales.

Unfortunately, there has again been an increase in our infant mortality rate (27.3 against 20.3) and, for the first time since 1959, it is higher than the national average. This is accounted for by the deaths (from prematurity) of triplets, and of one set of twins. In a small Authority such as this, these five infant deaths cause a big increase in the infant mortality rate.

The death rate is well below that of the national figure, being 9.6 per 1000 of the population, against a rate of 11.3 for England and Wales as a whole.

Although one death only was attributed to respiratory tuberculosis in 1964, I would again draw attention to the fact that during the past three years, 25 per cent of the new cases of tuberculosis notified in Peterborough occurred among immigrants.

STAFF:

There has been no change in medical staff during the year. I continued to act as Medical Officer of Health to the Peterborough and Barnack Rural Districts, and to the Ketton Rural District in Rutland, as it was not found possible to fill the post of Assistant Medical Officer (vacant since March, 1962).

I thank my colleague Dr. W. G. Sneaton for his continued help, and the Chairman and Members of the County Health Committee for their support at all times.

I should like, also, to express my gratitude to the many voluntary bodies and individuals who assist in so many ways, and also to my own staff in the County Health Department, who have contributed so much to the smooth running of the service.

Finally, it is with great regret I have to inform you that my colleague and friend, the Administrative Officer, Mr. John Dunford, is retiring after forty-six and a half years work in the Public Health Service. His unfailing kindness, patience, and understanding, shown to members of the public, to all the nurses, and particularly to new members of the staff, has become one of the symbols of the County Health Department.

Mr. Dunford's place will not readily be filled and he will leave behind him the lasting memory of a man who has lived up to the highest tenets of unswerving service in his particular field of public work, and of a very loyal and inspiring colleague.

I have the honour to be,

Your obedient Servant,

George Nisler

County Medical Officer.

August, 1965.

HEALTH DEPARTMENT STAFF - 1964

County Medical Officer of Health:-

GEORGE NISBET, M.B., CH.B., (ED) D.P.H., R.C.S., (ED).

Deputy County Medical Officer of Health:-

WILLIAM GIBB SMEATON, M.B., CH.B., D.P.H., Barrister-at-Law.

Assistant Medical Officer of Health:-

Vacant

<i>Superintendent Nursing Officer</i>	Miss I. Sylvester, S.R.N., S.C.M., H.V. Cert
<i>Health Visitors</i>	Miss F. Coles, S.R.N., S.C.M., H.V. Cert. Miss M. Gerrard, S.R.N., H.V. Cert. Miss C. Hendricks, S.R.N., S.C.M. Miss M. Julyan, S.R.N., S.R.C.N., H.V. Cert Mrs. P. Proctor, S.R.N., S.C.M., H.V. Cert. (Resigned 31st June, 1964) Miss B. Sewter, S.R.N., H.V. Cert. Mrs. D.A. Vyse, S.R.N., S.C.M., H.V. Cert. (Resigned 31st July, 1964)
<i>Student Health Visitors</i>	Mrs. S.A. Greaves, S.R.N., S.C.M. (Appointed 10th August, 1964) Mrs. J.A. Harrington, S.R.N. (Appointed 10th August, 1964)
<i>Tuberculosis Health Visitor</i>	Mrs. M. Gorton, S.R.N., B.T.A.
<i>Home Help Organiser</i>	Mrs. I.M. Winham, (Resigned 11th September, 1964)
<i>Home Help Organiser</i>	Mrs. M. Riddington. (Appointed 14th September, 1964)
<i>Assistant Home Help Organiser</i> (Part-time)	Mrs. M. Riddington (Resigned 11th September, 1964)
<i>Assistant Home Help Organiser</i> (Part-time)	Mrs. Clements (Appointed 1st October, 1964)
<i>Home Teacher for the Blind</i>	Miss D.E. Elkington
<i>Administrative Assistant</i>	J. J. Dunford
<i>Senior Social Welfare Officer</i> <i>and Mental Health Officer</i>	G. Smith
<i>Assistant Social Welfare Officer</i> <i>and Mental Health Officer</i>	J. W. Pettit
<i>Trainee Social Welfare Officer</i> <i>and Mental Health Officer</i>	D. W. Favell

Midwives

Miss M.R. Chapman, S.C.M.
 Mrs. J.F. George, S.C.M.
 Mrs. S.A. Greaves, S.R.N., S.C.M.
 (Appointed Student Health Visitor
 from 10th August, 1964)
 Miss E.E. Lepper, S.R.N., S.C.M.
 Miss M. Needham, S.R.N., S.C.M.
 Miss J.M. Robbins, S.R.N., S.C.M.
 Miss P. Sharpe, S.R.N., S.C.M.
 Mrs. J.D. Steward, S.R.N., S.C.M.
 Mrs. D.A. Vyse, S.R.N., S.C.M., H.V. Cert.
 (Appointed 29th October, 1964)

District Nurses

Mrs. M. Latchford, S.R.N. (Barnack Area)
 Mrs. J. Seaward, S.R.N. (Helpston Area)
 Mrs. E. Sismey, S.R.N. (Castor Area)

*District Nurses employed by the
 Florence Saunders Nursing Association :-
 (on an Agency basis)*

Mrs. E.V. Challinor, S.R.N., S.C.M. City Area
 (Appointed 4th February, 1964) " "
 Mrs. J.E. Douglass, S.R.N. " "
 (Resigned 20th September, 1964)
 Mrs. M. Flatters, S.R.N. " "
 Miss H. Hinchcliffe, S.E.N. " "
 Mrs. B.W. Ingle, S.R.N. " "
 Mrs. B. Schrey, S.E.N. " "
 Mrs. P.M. Tegerdine, S.R.N. " "

DISTRICT MEDICAL OFFICERS OF HEALTH
 AND PUBLIC HEALTH INSPECTORS

<u>District</u>	<u>Medical Officer of Health</u>	<u>Public Health Inspector</u>
<i>City of Peterborough</i>	W.G. Smeaton, M.B., CH.B., D.P.H., Barrister-at-Law	J. Hall, M.S.I.A., Cert. R.SAN.I., A.M.I.SAN.E.
<i>Peterborough Rural) District)</i>	Acting Medical Officer of Health George Nisbet, M.B., CH., B. (ED) D.P.H., R.C.S. (ED).	M.R. Gibbs, A.R., SAN. I., M.S.I.A.
<i>Barnack Rural) District)</i>		D.W. Griffiths, M.S.I.A., A.R., SAN. I. M.R.S.H.

SECTION A

STATISTICS

Area of Administrative County	53,464	acres.
Population (Census 1961)	74,442	
Population 1964 (mid-year estimate)	79,680	
Rateable Value	£ 2,801,487	
Estimated Product of a penny rate	£ 11,608	
	<u>Soke of</u>	<u>England</u>
	<u>Peterborough</u>	<u>& Wales</u>
Live Births: Males 798		
Females 812	Total	
	1,610	
Live birth rate per 1,000 population	20.2	18.4
Illegitimate live births per cent of total live births	8.2	
Stillbirths: Males 20		
Females 14	Total	
	34	
Stillbirth rate per 1,000 live and stillbirths	20.6	16.3
Total live and stillbirths	1,644	
Infant deaths (deaths under one year)	44	
Infant Mortality Rate:		
Total (per 1,000 live births)	27.3	20.0
Legitimate (per 1,000 legitimate live births)	27.7	
Illegitimate (per 1,000 illegitimate live births)	22.5	
Neonatal Mortality Rate (deaths under four weeks per 1,000 total live births)	18.6	13.8
Early Neonatal Mortality Rate (deaths under one week per 1,000 total live births)	17.8	
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)	44.4	
Maternal Mortality (including abortion)	0.0	0.25
Deaths (all causes) Males 388)		
Females 379)	767	
Death Rate per 1,000 population	9.6	11.3

Population

<u>District</u>	<u>Estimated mid-1964</u>
City of Peterborough	64,770
Peterborough Rural District	8,760
Barnack Rural District	6,150
Administrative County	79,680

The estimated population for mid-1963 was 78,020. Therefore, according to the Registrar-General's estimate, the population of the County has increased by 1,660 i.e., an increase of 990 in the City, 250 in the Peterborough Rural District, and an increase of 420 in the Barnack Rural District. In 1963 there was an estimated decrease of 10 in the Barnack Rural District.

Births

The number of live births assigned to the County was 1,610 (comprising 798 males and 812 females), thus giving a birth rate of 20.2 per 1,000 of the population, as compared with a rate of 18.1 for England and Wales. In 1963 our birth rate was 19.5 compared with 18.2 for England and Wales.

123 of the 1,610 children born in the County in 1964 were illegitimate (8.2 per cent, compared with 6.8 per cent in 1963). This is the highest illegitimacy rate recorded in the County, being nearly double what it was a few years ago.

The number of live births and birth rates in each area of the County were:

<u>Area</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>	<u>Rate</u>
City of Peterborough	650	661	1,311	20.2
Peterborough Rural District	80	96	176	20.0
Barnack Rural District	68	55	123	20.0
Administrative County	798	812	1,610	20.2

Stillbirths

The number of stillbirths registered was 34 (20 males and 14 females) compared with 22 in the previous year. The rate per 1,000 total births was 20.6, compared with 14.3 in 1963, and with a rate of 16.3 for England and Wales.

Our stillbirth rate is not so satisfactory as it has been in past years, when it has usually been below that of the national average.

Infant Mortality

The number of infants who died before attaining their first birthday was 44 (26 males and 18 females), compared with 31 in 1963. Of these there were three illegitimate infant deaths. The rate per 1,000 related live births was 27.3 compared with a rate of 20.3 in 1963, and of 12.9 in 1962. For the first time for many years our infant mortality rate is higher than that for England and Wales as a whole, which is disappointing.

The number and rates in each district of the Administrative County per 1,000 births were as follows:-

City of Peterborough	36	Rate	27.4
Peterborough Rural District	2	"	11.3
Barnack Rural District	6	"	54.8
Administrative County	44	"	27.3

The very high infant mortality rate in the Barnack Rural District is noteworthy. Five of the six infant deaths in the Barnack Rural District occurred at Wittering, mainly in Service families.

The following Tables shows the live birth rates and infant mortality rates in England and Wales for the years 1952 - 1964, and for comparison, similar details for the Soke of Peterborough.

Year	<u>England and Wales</u>		<u>Soke of Peterborough</u>	
	<u>Live Births per</u> <u>1,000 population</u>	<u>Infant</u> <u>Mortality</u>	<u>Live</u> <u>Births</u>	<u>Infant</u> <u>Mortality</u>
1952	15.3	27	15.3	20
1953	15.5	26	16.4	26
1954	15.2	25	15.8	22
1955	15.0	24	16.8	27
1956	15.7	23	17.6	29
1957	16.1	23	18.1	24
1958	16.4	22	18.9	25
1959	16.5	22	19.2	23
1960	18.1	22	20.5	20
1961	17.4	21	18.9	17
1962	18.0	21	18.9	12
1963	18.2	20	19.5	20
1964	18.4	20	20.2	27.3

I have records of 42 of the 44 infant deaths (as recorded on the copies of death certificates supplied to me) which were as follows:

Broncho-pneumonia	18
Congenital Malformations	11
Prematurity	10
Asphyxia	2
Congestive heart failure	1

Three of the infant deaths occurred in triplets, and two in twins - all due to prematurity. It was these five deaths which caused our infant mortality rate to rise above the national average.

31 of the infants died in hospitals or maternity units attached to hospitals. 29 of the 44 deaths of infants occurred under one week of age, giving an early neonatal mortality rate of 17.8 compared with a rate of 11.8 in 1963, and of 10.2 in 1962.

Maternal Mortality

I am pleased to report that there were no deaths during the year associated with childbirth. There has been only one maternal death in the County during the last six years (in 1962).

Deaths

The total number of deaths assigned to the County by the Registrar-General after adjusting for outward and inward transferable deaths was 767, compared with 874 in 1963. This gives a crude death rate of 9.6 per 1,000 population. The death rate for England and Wales was 11.3 per 1,000 home population, compared with a rate of 12.2 in 1963.

388 of the 767 deaths in the County occurred in males and 379 in females.

The following chief causes of death accounted for 81.6 per cent of the total deaths during the year, viz:

Coronary disease, angina	169
Cancer (including Leukaemia)	165
Vascular lesions	99
Other heart diseases	59
Other circulatory diseases	25
Bronchitis	40
Pneumonia	38
Accidents	31

The deaths classified in age periods (Registrar-General's figures) are:

0 - 1 years	44
1 - 5 "	4
5 - 15 "	1

15 - 25	years	9
25 - 35	"	4
35 - 45	"	27
45 - 55	"	51
55 - 65	"	117
65 - 75	"	203
75 years and over		307
Total		767

It will be noted that 66.5 per cent of the deaths occurred in persons aged 65 years and over.

Deaths from Cancer

There were 165 deaths from cancer in the County in 1964, giving a death rate of 2.0 per 1,000 of the population - the highest rate recorded from this disease. 31 of the deaths - approximately 20 per cent - were due to malignant disease of the lung or bronchus. 27 of these were males.

There were 17 deaths in females from carcinoma of the breast, and 21 deaths from malignant disease of the stomach.

I append a Table showing the cause of the 767 deaths in the County during the year 1964 (the figures being those issued by the Registrar-General) and for comparison those for 1962.

<u>Causes of death</u>	<u>1964</u>		<u>Total</u>	<u>1963</u>
	<u>Males</u>	<u>Females</u>		
Tuberculosis, Respiratory	1	-	1	-
Tuberculosis, Other	-	-	-	1
Syphilitic disease	-	3	3	1
Other infective & parastic diseases	-	1	1	-
Malignant Neoplasm (stomach)	12	9	21	19
Malignant Neoplasm, Lung Bronchus	27	4	31	33
Malignant Neoplasm, Breast	-	17	17	19
Malignant Neoplasm, Uterus	-	8	8	4
Other Malignant & Lymphatic Neoplasms	51	35	86	70
Leukaemia, Aleukaemia	2	-	2	4
Diabetes	1	8	9	5
Vascular Lesions of Nervous System	46	53	99	120
Coronary Disease, Angina	92	77	169	170
Hypertension with heart disease	3	5	8	13
Other Heart Disease	22	37	59	77
Other Circulatory Disease	13	12	25	51
Influenza	-	-	-	9
Pneumonia	16	22	38	72

	<u>1964</u>			<u>1963</u>
	<u>Males</u>	<u>Females</u>	<u>Total</u>	
Bronchitis	26	14	40	50
Other diseases of Respiratory System	3	3	6	5
Ulcer of Stomach and Duodenum	4	-	4	8
Gastritis, Enteritis & Diarrhoe	-	3	3	6
Nephritis and Nephrosis	2	2	4	4
Hyperplasia of Prostate	4	-	4	4
Congenital Malformations	5	6	11	11
Other defined and ill-defined diseases	34	45	79	72
Motor Vehicle accidents	9	1	10	16
All other accidents	10	11	21	21
Suicide	4	3	7	8
Homicide and operations of war	1	-	1	1
		<u>Totals</u>	<u>767</u>	<u>874</u>

SECTION B

GENERAL PROVISION OF HEALTH SERVICES

Care of Mothers and Young Children

A. Care of Mothers.

The number of births notified in the area under Section 203 of the Public Health Act, 1936, as adjusted by transferred notifications was:-

	<u>Live Births</u>	<u>Stillbirths</u>	<u>Total</u>
Domiciliary	534	3	537
Institutional	1,057	36	1,093
Total	<u>1,591</u>	<u>39</u>	<u>1,630</u>

Details of all notified births are transmitted to the health visitors who begin visiting after the tenth day.

Ante-natal clinics are held at "The Gables" Maternity Hospital, Peterborough, for patients who have booked for admission to Maternity Units of the Regional Hospital Board.

No doctors' ante-natal clinics are held under the auspices of the Local Health Authority: all women are attended ante-natally by their own doctor.

Midwives' ante-natal clinics are held at the Child Welfare Centre at the Town Hall and at the Centre at Dogsthorpe. Blood testing is not carried out at these clinics but the majority of general practitioners make these tests, and

arrangements are made for me to receive the results of all blood tests, except those carried out by practitioners in Stamford. All women have a general examination by their own doctor for fitness to receive gas and air analgesia.

During the year 1964, 764 women attended these clinics and the total attendances were 2,494 compared with 2,411 attendances made by 668 women in 1963.

Mothercraft and relaxation classes are held weekly at the Town Hall and Dogsthorpe Welfare Centres, and during the year 1964, 356 mothers attended these classes compared with 308 in 1963. Invitations to attend the classes are sent by post from my office to all expectant mothers, including those who have booked for admission to the Maternity Units.

The Mothers' Clubs which meet monthly at the Town Hall and Dogsthorpe Centres, and the Parents' Club associated with the Walton Centre continue to be well attended. They are popular and provide an excellent media for health education and information about public health and home safety measures.

Each year three cups are presented at the Mothers' Club Annual Party, usually held in the Town Hall in January, viz.

- (1) Home Safety Cup for mothers. This is won by the mother who makes the best home safety suggestion etc.
- (2) 'Janet Nisbet' cup for fathers. Again for the best home made toy or home safety devise.
- (3) Knitting Cup - given for the best knitted garment.

Unmarried Mothers and Care of Illegitimate Children

Arrangements for the care of unmarried mothers are made in liaison with the Peterborough Diocesan Family and Social Welfare Council, which is a voluntary organisation.

During the year 1964, applications were received for the admission of 22 unmarried mothers to 'mother and baby' homes at the expense of the Local Authority. Seventeen of the mothers were 20 years of age or under.

This is the highest number of cases of unmarried mothers for which the Local Authority has been asked to accept responsibility, but as I have previously pointed out our illegitimate birth rate is the highest ever recorded.

B. Care of Children

Child Welfare Centres

Fourteen Child Welfare Centres were maintained by the Local Health Authority.

during the year. They are situated as follows:

- | | |
|--|--|
| (1) Town Hall, Peterborough | Tuesday mornings and afternoons.
Wednesday afternoons. |
| (2) Mountsteven Avenue,
Walton, Peterborough. | Monday and Thursday afternoons. |
| (3) Lawn Avenue, Dogsthorpe,
Peterborough. | Monday and Thursday afternoons. |
| (4) Barnack (Village Hall) | Third Thursday afternoon each month. |
| (5) Bainton (Reading Room) | First Wednesday afternoon each month. |
| (6) Castor (Village Hall) | Second and Fourth Tuesday afternoons
each month. |
| (7) Eye (Methodist Church
Schoolroom) | First and Third Monday afternoons
each month. |
| (8) Glinton (Village College) | First Thursday and Third Wednesday
afternoons each month. |
| (9) Helpston (School Canteen) | Fourth Wednesday afternoon each month. |
| (10) Maxey (Congregational Church
Hall) | Second Wednesday each month |
| (11) Newborough (Dr. Fuller's
Surgery) | Second and Fourth Tuesday afternoons
each month. |
| (12) Werrington (Parish Hall) | First and Third Friday afternoons
each month. |
| (13) Westwood (Mission Church Rooms) | Second and Fourth Friday afternoons
each month. |
| (14) Wittering (Sick Quarters
R.A.F. Station) | First and Third Wednesday afternoons
each month. |

There are no voluntary child welfare centres in the County. However, voluntary workers assist at the Local Authority Clinics and their services are much appreciated, particularly as in some cases, they pay their own 'bus fares to travel to and from the clinics.

Toddler's Clinics are held fortnightly at the Town Hall, Dogsthorpe, and Walton, appointments being sent from my office. A medical member of the staff always attends these clinics.

I append a statistical record of the work performed at the child welfare clinics during the year 1964:

Number of children who attended during the year:

Born 1964	932
" 1963	898
" 1959 - 1962	1,056
Total	<u>2,886</u>

Number of Sessions held by:

Medical Officers	75
Health Visitors	442
G.P's employed on sessional basis	105
Hospital medical staff	21
Total	<u>643</u>

Number of children referred for special treatment or advice	67
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Number of children on " at risk" register at end of year	335
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An " at risk" register is used in schemes for the early detection of abnormalities in children and includes such groups as premature infants, haemolytic disease of the newborn, congenital abnormalities, difficult births, history of virus infection in the mother etc.

Premature Births

Babies weighing 5½ lbs or less at birth are classified as premature. 111 premature live births were notified in the County during the year (6.8 per cent of the total live births). 102 of these births occurred in hospitals and 9 at home.

Day Nursery

One Day Nursery is maintained by the Local Health Authority. It is situated in Granville Street, Peterborough, and has approved places for 45 children (15 aged under two years and 30 for children aged 2 - 5 years). The average daily attendance during the year was 33.

Nurseries and Child-Minders Regulations Act, 1948

At the end of the year there were six premises registered under the Child Minders Regulations, accommodation being provided for a maximum of 75 children.

Dental Care

The Local Health Authority is not responsible for the School Health Service and therefore does not employ a Dental Officer. However, arrangements have been made between the Peterborough Joint Education Board and the County Council whereby expectant and nursing mothers and children under five years of age are treated by the School Dental Surgeons. The time allocated for this work is one half-day per week.

During 1964, 13 expectant or nursing mothers were examined and treated and made dentally fit. 76 pre-school children were also examined. 43 of these were found to require treatment and all received the necessary attention.

MIDWIFERY

35 midwives notified their intention to practice in the County during the year 1964. 27 were employed by the Hospital Management Committee or Board of Governors under the National Health Service Act, and eight were employed as domiciliary midwives by the Local Health Authority.

Deliveries attended by domiciliary midwives during 1964 were as follows:

Doctor not booked	0
Doctor booked	533
Number of cases delivered in hospitals but discharged and attended by domiciliary midwives before 10th day	186

The County Council midwives attended a total of 533 cases in 1964 (32.4 per cent of the total live and stillbirths) compared with 34 per cent in 1963 and 36.2 per cent in 1962.

Analgesia

All the midwives employed by the Local Health Authority are qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board. An apparatus is supplied to every midwife. Pethedine is also administered by the midwives in domiciliary practice.

HEALTH VISITING

At the end of the year the health visiting establishment consisted of five health visitors, one tuberculosis health visitor, and two student health visitors, plus the Superintendent Nursing Officer.

The following is a summary of visits paid by health visitors during the year 1964:

Cases visited by health visitors:

Children born in 1964	..	..	..	..	1659
Children born in 1963		..	..	..	935
Children born in 1959 - 1962	.	..	..	..	1984
Total					<u>4578</u>

Other Visits

Persons aged 65 or over	..	..	..	..	84
Mentally disordered persons	..	..	..	..	37
Persons (excluding maternity cases) discharged from hospitals					7
Number of tuberculous households	..	..	..		10
Number of households visited on account of other infectious diseases				..	2
Number of visits to tuberculous households by T.B. Health Visitor				..	743

Liaison arrangements between General Practitioners and Hospitals with Local Health Service.

Since the end of 1963 arrangements have been in operation for health visitors to work with particular medical practitioners or groups of practitioners, and also with the Paediatrician at the Peterborough Memorial Hospital - as suggested in the Gillie Report. The scheme is working satisfactorily, and is appreciated by the majority of the practitioners.

HOME NURSING

In the City of Peterborough home nursing is undertaken by the Florence Saunders Nursing Association on an agency basis. Six whole-time nurses are employed, four of whom have cars for which they receive the appropriate allowance.

In the rural areas of the County three whole-time district nurses are

employed by the Local Health Authority. Each of these nurses has a car, so the whole district is adequately covered. The rural nurses reside respectively at Barnack, Castor, and Helpston.

The total number of persons nursed during the year was 883, compared with 829 in 1963. 601 of these were aged 65 years or over at the first visit.

VACCINATION AND IMMUNISATION

Vaccination against smallpox, and diphtheria immunisation are carried out by general practitioners, the fees for completed record cards being paid for by the Local Health Authority for young persons under the age of 16 years.

Vaccination against poliomyelitis is carried out by the general practitioners in the City - with the exception of one practice - the fees again being paid for completed record cards by the Local Authority. Most of the doctors practising in the rural areas prefer to leave poliomyelitis vaccination to the County Medical staff.

Triple antigen (for immunisation against diphtheria, whooping cough and tetanus) is available - free of charge - to general practitioners, and tetanus vaccine, where patients have not previously received triple antigen, is also available, free of charge, upon application to the County Health Department.

Further information with regard to vaccination and immunisation is given under Section C of this report (Prevalence of, and control over, infectious and other diseases)

AMBULANCE SERVICE

The County Council is responsible under the National Health Service Act, 1946, for arranging the conveyance of sick and injured persons who are unfit to travel by ordinary means of transport, where the necessity arises. The establishment consists of 20 ambulance driver/attendants, plus one traffic controller.

The Ambulance Service is operated in combination with the Fire Brigade, the Chief Fire Officer being also the Ambulance Officer.

The fleet of ambulances consist of:

Five stretcher ambulances
Three clinic ambulances
One car/ambulance

A total of nine vehicles.

The following is a summary of the work carried out by the County Ambulance Service in 1964:

<u>Directly Provided Service</u>	<u>Total Patients</u>	<u>Total Miles</u>
Ambulances	13,991	85,697
Sitting case vehicles	14,994	74,034
<u>Supplementary Services</u>		
Hospital Care Service	1,039	40,367
Rail journeys	12	1,367
Totals-	<u>30,036</u>	<u>201,465</u>

PREVENTION OF ILLNESS, CARE AND AFTER CARE

Tuberculosis

The responsibility of the Authority is in relation to prevention, care and after-care. Treatment of tuberculosis is provided by the Regional Hospital Board.

One full-time Tuberculosis Health Visitor is employed by the County Council. She works in close co-operation with the Chest Physicians of the Regional Hospital Board, and in addition to assisting them at the Chest Clinic, she carries out home nursing of tuberculosis patients, visits contacts to investigate home conditions and to persuade them to attend the Clinic for examination, and carries out Mantoux testing of children etc. During 1964 a total of 743 home visits were paid by the Tuberculosis Health Visitor.

Beds, bedding and nursing requisites are available for patients being nursed at home. Tuberculous patients receive domestic help if required, and free milk is provided in necessitous cases.

The statistical tables and other information with regard to tuberculosis are given under Section C of this report.

Other Types of Illness

For the care and after-care of non-tuberculous sick, patients discharged from hospitals, etc, any necessary care and attention is provided through the Council's home nursing and home help service.

Loan of Nursing Equipment

Nursing equipment and apparatus required by patients being nursed at home,

such as wheel chairs, bed rests, bed pans, rubber sheeting, etc. is provided, on loan, by the Local Health Authority.

Chiropody Service

The chiropody service is organised through the Peterborough Old People's Welfare Committee, which is a voluntary organisation. The County Council makes a grant of £1,500 yearly to include the cost of this service.

The service provides treatment to any woman who is 60 or over and to any man who is 65 or over. The patient pays 2/6d per treatment, and the Old People's Welfare Committee pays the balance of the chiropodist's fee, plus equipment, dressings, travelling and postage expenses.

In the main the service is domiciliary, but sessional treatment is arranged at various centres in the City to permit treatment to be given to those who are not housebound and are within easy reach of a centre.

At the end of December 1964, a total of 1,654 cases were on the register, including 204 cases in the Soke villages, and 12 handicapped persons under the age limit who are given treatment at the request of the County Council.

DOMESTIC HELP SERVICE

Domestic home help was provided for a total of 504 households in 1964, including 48 chronic sick and tuberculous persons, and 82 maternity cases. 363 of the 504 cases were aged 65 years or over on the first visit in 1964.

The standard charge to users of the service is 4/6d. per hour, and the standard charge for maternity cases is £6. 15s. 0d per week. From September 7th, 1964, the workers were paid at the rate of 4/³/₈d. per hour, plus 2d per hour when working where tuberculosis or certain other infectious diseases are present. The gross cost of the service per working hour was 5/¹/₄d.

The Home Help Organiser (Mrs. Winham) resigned in September to take up a part-time appointment with the Joint Education Board, and Mrs. Riddington (the former Assistant Home Help Organiser) was appointed in her place.

MENTAL HEALTH SERVICE

Administration

The Mental Health Sub-Committee of the County Health Committee consists of eight members of the County Council and three co-opted members, and meets on the third Tuesday of each month. This Committee deals with all the matters relating to the care of the Mentally Disordered.

Staff

The County Medical Officer, as the Medical Advisor to the Mental Health Committee, has on his staff one Social Welfare Officer/Mental Health Officer, one Mental Health Officer and a Student Trainee Assistant who in September 1964 commenced a two year course at the Leeds College of Commerce. The Lay Administrative Officer has acted as Mental Health Officer in the absence of the regular staff.

Staff - Junior Training Centre

The Junior Training Centre consists of one supervisor, six assistants and two student trainees. In addition, two student trainees have commenced a course for the Diploma of the National Association for Mental Health. One is attending the Bristol course and the other is at Chiswick Polytechnic.

Prevention, Care and After-care.

It is not very pleasing to report that the number of admissions and re-admissions to Rauceby Hospital has shown an increase. This may be due to differing factors; the slight increase in the number of beds available following extensive alterations at the hospital, and, in the case of re-admissions, to the lack of time available to my Mental Health Staff to carry out the so essential follow-up cases on their discharge from hospital. Only by constant and regular follow-up visits can we hope to prevent an increase in the number of re-admissions. The Medical Superintendent has forwarded to me numerous cases for follow-up and after-care and wherever possible this has been done. Thanks to the co-operation between members of my staff and the staff at the hospital, excellent progress has been made. However, until the staff shortage can be remedied, I am sure that re-admissions from this area will continue to run at a high rate.

Compulsory Admissions

This year has shown a large increase in the number of compulsory admissions and re-admissions on the female side whereas the male side has shown a fair reduction. I am wondering if this is accounted for by hospital attitudes rather than by medical needs. It might well be that we shall have to look to ourselves and our methods for an effective reduction in the number of compulsory admissions.

Cases dealt with under the Mental Health Act, during the year, were as follows:-

<u>Mental Health Act, 1959</u>						<u>Males</u>	<u>Females</u>	<u>Total</u>
Informal patients	..	..	..	..	..	55	75	130
Section 29	..	..	..	..	..	16	40	56
Section 25	..	..	..	..	..	1	-	1
Section 26	..	..	..	..	..	1	-	1
Section 60	..	..	..	..	..	1	-	1
						74	115	189

The age groups of these cases were as follows:-

						<u>Males</u>	<u>Females</u>
16 - 20	..	..	..	..	..	7	3
21 - 30	..	..	..	..	..	12	19
31 - 40	..	..	..	..	..	14	25
41 - 50	..	..	..	..	..	18	15
51 - 60	..	..	..	..	..	9	15
61 - 70	..	..	..	..	..	10	19
70 +						4	19

The number of cases in Psychiatric Hospitals on 31st December, 1964, were as follows:-

<u>Name of Hospital</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
St. John's Hospital, Lincoln	-	4	4
Kingsway Hospital, Derby	-	1	1
Carlton Hayes Hospital, Leicester	1	1	2
The Towers Hospital, Leicester	-	3	3
Leavesden Hospital, Abbots Langley	1	-	1
Rauceby Hospital, Sleaford	68	85	153
	70	95	165

Mentally Sub-Normal

Ascertainment

The successful ascertainment of all mentally retarded children has continued during the past year as I, in my capacity of County Medical Officer in charge of Maternity and Child Welfare Services, and as Principal School Medical Officer, continued to see all such children in the area. My thanks are once again due to the Consultant Child Psychiatrist who has recently been appointed at the Memorial Hospital and who has been very helpful when cases of difficulty have arisen.

Training of the Mentally Sub-Normal

By September, 1964, the extension to the Junior Training Centre was completed and furniture and equipment had been purchased. An addition to the staff of a male instructor has produced gratifying results and great steps forward are taking place with outwork and handcrafts. The number of children attending the Centre has now risen to an all time high of 65 pupils. It would seem obvious that the need of an Adult Training Centre in the area is very great.

The annual outing and picnic was held this year on a farm in Crowland and was immensely enjoyed by all of the children. The annual open day was a great success and a record number of people passed through the Centre.

A further outing, to Skegness, for the children was organised by Toc H and approximately 40 of the older boys and girls at the Centre attended. I am very grateful to this organisation, who provided the coach and met the cost of the meals and sent a number of their members as helpers.

The annual Harvest Festival was again a most moving and touching event and the large amount of produce brought by the children was beautifully displayed. After the Service, conducted by the Reverend B. Wood and the Reverend D. H. Palmer, the following day a number of children visited the George Matthews Flatlets, Eye, and presented gifts of fruit and vegetables to the occupants.

The Christmas concert and open day once again proved a wonderful success and indicated to me the very hard work which must have gone into preparing it throughout the year. I am very grateful to all the staff who contributed so much of their spare time to make the concert a success.

On the 31st December, 1964, the following mentally sub-normal persons were in Hospitals, on Leave, and under Supervision:

<u>In Hospital</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
Stoke Park Hospital, Nr. Bristol	4	4	8
Little Plumstead Hospital, Nr. Norwich	24	14	38
Lisieux Hall, Nr. Chorley, Lancs	1	-	1
Rampton Hospital	-	1	1
Risbridge Home, Haverhill	12	-	12
Royal Eastern Counties Hospital, Colchester	-	1	1
Nayland Hospital, Nayland, Colchester	-	12	12
Calderstone Hospital, Whalley, Blackburn	1	-	1
Riversfield Home, St. Neots.	1	1	2
Harmston Hall Hospital, Nr. Lincoln	-	1	1
	43	34	77

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Mentally Sub-Normal on Leave	2	1	3
Mentally Sub-Normal under supervision	45	49	94
Mentally Sub-Normal awaiting admission to hospital	5	8	13

Accommodation Waiting List

During the year two mentally sub-normal persons were admitted to hospitals for a period of temporary care and four children were admitted from the Waiting List on a permanent basis.

Ambulance Service

The Ambulance Service is available for the conveyance of patients to psychiatric hospitals and their most helpful co-operation in all cases has been much appreciated.

SECTION C.

NATIONAL ASSISTANCE ACT, 1948

WELFARE SERVICES

Part III Accommodation

The County Council's functions under the National Assistance Act have been delegated to the Welfare Sub-Committee of the County Health Committee, and are under the direction of the County Medical Officer, who is also Chief Welfare Officer. Meetings of this Sub-Committee are held on the first Tuesday afternoon of each month.

Applications for admission to Part III accommodation are investigated by the social welfare officers and are sanctioned by a small Sub-Committee of the Welfare Sub-Committee:

The following accommodation is provided:

St. John's Close	154
Vawser Lodge	40
Exeter Lodge	36

The present standard charges are £7. 13s 5d. per week at St. John's Close and £7. 0s 7d. Vawser Lodge and Exeter Lodge.

Blind

The County Council employs a full-time Home Teacher for the Blind (Miss D. E. Elkington). There is also a voluntary welfare committee.

The number of registered blind persons in the County at 31st December, 1964 was 147 viz 59 males and 88 females. A hundred and one of these were aged 65 years or over.

The following Table gives particulars of the blind and partially sighted (P/S) cases certified on Form B.D.8. in the County during 1964.

Causes of Disability

	Cataract		Glaucoma		Retrolental Fibroplasia		Others	
	Blind	P/S	Blind	P/S	Blind	P/S	Blind	P/S
(1) No. of cases registered during the year in respect of which section F. of Form B.D.8 recommends:								
(a) no treatment	2	1	2	-	-	-	7	2
(b) Treatment, medical surgical or optical	12	3	1	1	-	-	5	2
(11) No. of cases at (b) above which, on follow up action have received treatment.	7	1	-	-	-	-	3	1

Deaf and Dumb

The Soke of Peterborough County Council makes a grant of £200 a year to the Northamptonshire and Rutland Mission to the Deaf, which continues to give valuable assistance - on an agency basis - to the welfare of the deaf and dumb in the County.

In the 36th Annual Report for the year ended March 31st, 1965, the following remarks are made about Peterborough:

" Each year we mention the fact that Peterborough runs as a separate centre for the deaf and is virtually a Mission on its own under the care of Mr. Stanley Gascoine, our Honorary Welfare Officer and his wife. We are most grateful to them for the work that they do.

Sunday services at Peterborough are taken by the Reverend Kenneth Earle, Mr. Marston (Trainee) and Mr. John Favell (Honorary Reader)".

W.V.S. Work for the Welfare of the Elderly.

I have received the following Report from the County Organiser of the Women's Voluntary Service (Mrs. A. G. Smith) with regard to the work for the elderly.

"
Meals on Wheels

Hot meals are delivered twice weekly to house-bound elderly people. This service is organised by W.V.S. for Peterborough Old People's Welfare Committee. Approximately 100 recipients in the City, and 40 in the villages (Eye, Glinton, Peakirk, Maxey and Helpston) are receiving this amenity.

Meals are obtained from St. John's Close, and in the case of Maxey and Helpston, from Messrs. Toogood and Beckwith, Helpston Mill.

The cost of the meal is 1s 0d. to the recipient and 1s 0d subsidised by the Peterborough Old People's Welfare Committee. Delivery is by volunteers, mostly using their cars at their own expense. In addition, a W.V.S. van and a mini van presented by Mrs. Hilda E. F. Mitchell on behalf of J. F. Roy Mitchell, are available.

I am most appreciative of the good work done by the Womens Voluntary Service, not only in the many activities I have mentioned above, but also for their assistance on many occasions, especially with clothing, welfare foods, etc.

Luncheon Club

Hot mid-day meals are served, once weekly, at the Broadway Club, for mobile elderly people. The number has, for various reasons to be limited to 40, who pay 2s. 0d. each per meal. The meals are obtained from St. John's Close, the equipment being supplied by the Peterborough Old People's Welfare Committee. This weekly meeting has been most successful in bringing together lonely people. Outings and whist drives are also organised.

Library

At the request of the Home Teacher for the Blind a library service has been started for the house-bound. Special large print books are supplied by the Public Library, and exchanged weekly. Partially blind and handicapped elderly people appreciate this service, not only for the reading matter provided, but also for a friendly visit.

Darby and Joan Club

Three weekly Derby and Joan Clubs are going well, one at the Broadway Club for the over 65's, one at St. John's Close for the residents, and one at Dogsthorpe.

Trolley Shop

Once weekly, a "shop" is taken to St. John's Close for the residents. An assortment of sweets, biscuits, stationery, cosmetics, etc., is taken round the various departments. Shop prices are charged, and any profits made go back to the residents in the shape of gifts and outings, during the summer.

We also operate a library and we appeal to the public for suitable books for this amenity."

SECTION DPREVALENCE OF, AND CONTROL OVER INFECTION AND OTHER DISEASES1. INFECTIOUS DISEASES

502 cases of infectious diseases were notified to the District Medical Officers in 1964, compared with 1,274 in 1963; 455 in 1962; 1864 in 1961, and 371 in 1960. 1964 was not a "measles year" which accounts for the reduction in the number of cases of infectious disease notified.

Scarlet Fever

Seven cases were notified, compared with one case only in 1963.

Whooping Cough

It is rather disappointing to note that 50 cases of whooping cough were notified in the County in 1964, compared with 20 cases in 1963 and no cases occurring in 1962.

Measles

Epidemics of measles usually occur every other year. In 1964, 356 cases were notified, compared with 1,048 in the previous year.

Pneumonia

There was again a reduction in the number of cases notified - two only, compared with 11 in 1963, and 24 in 1962.

Food Poisoning

I regret to report that 25 cases of food poisoning occurred in the County,

23 of these being notified from the City area and two from the Peterborough Rural District.

Tuberculosis

A total of 19 cases were notified - 15 respiratory and four non-respiratory disease. This is the second lowest number of cases ever notified in the County.

Puerperal Pyrexia

41 cases were notified during the year, compared with 34 in 1963, and 56 in 1962.

The following Table shows the number of cases of each disease notified in the various sanitary districts:

	<u>Peterborough</u> <u>City</u>	<u>Peterborough</u> <u>R.D.</u>	<u>Barnack</u> <u>R.D.</u>	<u>Total</u>
Scarlet Fever	4	2	1	7
Whooping Cough	46	3	1	50
Measles	321	21	14	356
Acute Pneumonia	2	-	-	2
Food Poisoning	23	2	-	25
Tuberculosis:				
Respiratory	13	1	1	15
Other	4	-	-	4
Puerperal Pyrexia	41	-	-	41
Meningococcal Infection	1	1	-	2
Totals	<u>455</u>	<u>30</u>	<u>17</u>	<u>502</u>

2. VACCINATION AND IMMUNISATION

(a) Diphtheria Immunisation

The following Table shows the number of children who had completed a course of immunisation against diphtheria during the year 1964:

	<u>Children born in the years</u>							<u>Total</u>
	<u>1964</u>	<u>1963</u>	<u>1962</u>	<u>1961</u>	<u>1960</u>	<u>1955-1959</u>	<u>1950-1954</u>	
Number of children who completed a full course of Primary Immunisations in 1964	473	583	92	25	18	36	6	1233
Number of children who received a secondary (Reinforcing) injection	-	22	33	8	55	356	27	501

(b) Whooping Cough Vaccination

Whooping cough vaccination - the combined triple diphtheria-pertussis-tetanus antigen - is purchased by the Local Health Authority and provided to general practitioners as required.

The number of children who completed a primary course (normally three injections) of pertussis vaccine - singly or in combination - in the Authority's area during the year 1964 was:

<u>Year of Birth</u>	<u>Number vaccinated</u>
1964	482
1963	573
1962	95
1961	21
1960	23
1955 - 1959	35
1950 - 1954	16
Total	<u>1,245</u>

(c) Smallpox Vaccination

The following Table shows the number of vaccinations and re-vaccinations carried out during the year:

Number of Persons Vaccinated (or re-vaccinated)

<u>Age at date of Vaccination.</u>	<u>0-3 mths.</u>	<u>3-6 mths.</u>	<u>6-9 mths.</u>	<u>9-12 mths.</u>	<u>1</u>	<u>2-4</u>	<u>5-14</u>	<u>15 or over</u>	<u>Total</u>
Number vaccinated	16	95	64	30	184	43	3	13	448
Number re-vaccinated	-	1	1	1	9	5	9	44	70

(d) B.C.G. Vaccination

Details of the work carried out in 1964 are as follows:

Number of persons vaccinated through the Authority's approved arrangements under Section 28 of the National Health Service Act:

(a) Contact Scheme

(1) No: Skin tested	329
(11) No: Found positive	179
(111) No: Found negative	150
(IV) No: vaccinated	119

(b) School Children Scheme

(1)	No: skin tested	420
(11)	No: found positive	34
(111)	No: found negative	386
(1V)	No: vaccinated	0

(e) Poliomyelitis Vaccination

I append details of poliomyelitis vaccinations carried out during the year 1964:

Number of Persons completing primary immunisations

Children born in the year 1964	270
" " " " " 1963	642
" " " " " 1962	229
" " " " " 1961	50
" " " " " 1943-1960	130
Persons " " " " 1933-1942	23
Others	21
Total	<hr/> 1,365 <hr/>

Number of persons given third injections of Salk vaccine or 4th injections of quadruple vaccine	377
---	-----

Number of persons given 4th injections of Salk vaccine or 5th injections of quadruple vaccine	678
---	-----

Number of persons given a reinforcing dose of oral vaccine after	
(i) 2 Salk doses	14
(ii) 3 Salk doses or 3 Oral doses	643

3. TUBERCULOSIS(a) Notifications

During the year 1964, 15 new cases of respiratory tuberculosis were notified, and four of non-respiratory disease. Four of the cases occurred in patients other than British. During the past three years 25 per cent of the new cases of tuberculosis notified in Peterborough occurred in immigrants.

Particulars of the new cases notified in 1964, in age periods, are as follows:

<u>Age period</u>	<u>Respiratory</u>		<u>Non-Respiratory</u>		<u>Total</u>	
	<u>M.</u>	<u>F.</u>	<u>M.</u>	<u>F.</u>	<u>M.</u>	<u>F.</u>
0 - 5	1	-	1	-	2	-
5 - 10	1	-	-	-	1	-
10 - 15	1	-	-	-	1	-
15 - 20	2	-	-	-	2	-
25 - 35	2	-	-	1	2	1
35 - 45	1	-	-	-	1	-
45 - 55	6	-	1	-	7	-
65 - 75	1	-	-	1	1	1
<u>Totals</u>	<u>15</u>	<u>-</u>	<u>2</u>	<u>2</u>	<u>17</u>	<u>2</u>

It will be noted that no cases of respiratory tuberculosis occurred among females in 1964. It is also noteworthy that as many as six of the 15 new cases of respiratory disease occurred in men aged between 45 and 55 years, proving once again that tuberculosis is no longer a disease of the young only.

(b) Deaths

One death only was attributable to respiratory tuberculosis in 1964 - giving a death of 0.01 per 1,000 of the population. In 1963 there were no deaths from this cause in the Soke of Peterborough.

During the last decades there has been a dramatic reduction in the number of deaths from pulmonary tuberculosis. In the Soke of Peterborough, for instance, in the ten years from 1945 - 1954 there were 124 deaths, whereas in the ten years from 1955 - 1964 the number has decreased to 36.

I append a table in relation to tuberculosis of the lungs showing the number of notifications in the County during the last 20 years, and the incidence of deaths to new notifications.

<u>Year</u>	<u>New Notifications</u>	<u>Deaths</u>	<u>Percentage of deaths to Notifications</u>
1945	46	20	43.4
1946	43	23	53.4
1947	58	15	25.8
1948	28	19	67.8
1949	42	10	23.8
1950	73	10	13.7
1951	58	14	24.3
1952	84	9	10.7
1953	53	4	7.5
1954	77	5	6.5

<u>Year</u>	<u>New Notifications</u>	<u>Deaths</u>	<u>Percentage of deaths to Notifications</u>
1955	33	10	30.3
1956	35	5	14.3
1957	29	2	6.9
1958	27	5	18.5
1959	31	4	12.9
1960	36	1	2.7
1961	10	4	40.0
1962	27	4	14.8
1963	26	0	0.0
1964	15	1	6.6.

(c) Residential Accommodation

Admissions to Sanatoria are arranged by the East Anglian Regional Hospital Board, patients usually being admitted immediately their names are submitted to the Bed Finding Bureau.

During the year 16 patients from the Soke of Peterborough were admitted to Sanatoria, viz, 15 men and one woman. At the beginning of the year 9 men and 3 women were already in Sanatoria, so that a total of 28 patients received in-patient treatment during the year. At the end of the year six patients from the Soke were in Sanatoria.

(d) Prevention of Tuberculosis

The Consultant Chest Physician (Dr. G.B. Royce) submits quarterly reports to the County Health Committee on the prevention of tuberculosis. A summary of Dr. Royce's reports show that a total of 1,200 contacts were examined at the Chest Clinic in 1964, compared with 1,038 in 1963, and 1,073 in the previous year. 192 of these were new cases, compared with 303 in 1963.

102 patients received B.C.G. vaccination at the Chest Clinic during the year.

4. VENEREAL DISEASES

The one Venereal Diseases Clinic in the area is situated at the Out-patient Department of the Peterborough Memorial Hospital.

The clinical work and administration is the responsibility of the East Anglian Regional Hospital Board. Dr. N. A. Ross is the Consultant Venereologist in charge of the Centre, and clinics are held as follows, to which patients can be referred direct without appointments:

Mondays	4.30 to	6.30 p.m.	Males
Tuesdays	10.30 to	12.30 a.m.	Females & Children
Wednesdays	5.30 to	7 p.m.	Males
Thursdays	4.30 to	6.30 p.m.	Females

330 patients attended the clinic for the first time during the year 1964, compared with 294 in 1963, 251 in 1962, 253 in 1960, and 201 in 1959.

The 330 patients attending the Clinic for the first time came from the following areas:

<u>County</u>	<u>Totals</u>	<u>Syphilis</u>	<u>Gonorrhoea</u>	<u>Other Conditions</u>
Soke of Peterborough	210	7	64	139
Huntingdonshire	35	2	8	25
Isle of Ely	18	-	5	13
Kesteven	23	-	9	14
Northamptonshire	15	-	3	12
Others	29	1	6	22
Totals	<u>330</u>	<u>10</u>	<u>95</u>	<u>225</u>

While there was a slight reduction in the number of new cases of syphilis (10 against 14 in 1963), there was unfortunately a considerable increase in the number of new cases of gonorrhoea attending the clinic, viz, 95 compared with 67 in the previous year. This trend of an increase in gonorrhoea is general throughout the country. At the Peterborough Clinic the number of new cases of gonorrhoea has doubled in two years.

SECTION E

INSPECTION AND SUPERVISION OF FOOD

I have to thank Mr. R. E. Kilsby, the Chief Inspector of Food and Drugs for the following report on the work carried out in the year 1964:-

The Soke of Peterborough County Council was the Food and Drugs Authority for the Rural Parts of the County; as such it was responsible for the administration of the whole range of Acts and Orders which deal with the composition, description and labelling of Food and Drink. These Duties were carried out by the Weights and Measures Department in association with the County Health Department.

1. Samples examined for composition and quality.

A list of samples examined for composition and quality is given in the table overleaf.

<u>Article</u>	<u>Satisfactory</u>	<u>Not Satisfactory</u>	<u>Total</u>
Milk	36	-	36
Lemon	1	-	1
Sliced Green Beans	-	1	1
Pork Sausages	5	-	5
Minced Beef	2	-	2
Margarine	2	-	2
Cheese	1	-	1
Fruit and Almond Milk Chocolate	1	-	1
Mushroom Ketchup	1	-	1
Fruit Salad in Syrup	2	-	2
Jam	2	-	2
Pork Pie	2	-	2
Diary Butter	1	-	1
Lemonade Shandy	1	-	1
Antiseptic	1	-	1
Liquor Chloroxylenolis	1	-	1
Mincemeat	1	-	1
Cornish Ice Cream	1	-	1
Milk Chocolate Caramels	1	-	1
Tip Top Drink	1	-	1
Prunes with Cereal	1	-	1
Potato Crisps	1	-	1
Cough Mixture	1	-	1
Steak and Kidney Pudding	1	-	1
Rum (flavour) and Butter Sweets	1	-	1
Mixed Vegetables	1	-	1
Barley Sugar	1	-	1
Honey	2	-	2
Sour Lemon Bubble Gum	1	-	1
Evaporated Milk	1	-	1
Magic Lollies	1	-	1
Bonbons	1	-	1
Tea	1	-	1
Custard Powder	1	-	1
Creamed Horseradish	1	-	1
Fruit Pies	2	-	2
Baking Powder	1	-	1
Chocolate Eclairs	1	-	1
Apples	3	-	3
Plums	2	-	2
Stewed Steak	2	-	2
Jam Doughnuts	2	-	2
Chesey Crisps	1	-	1
Honey Cake	1	-	1
Dairy Cream	1	-	1
Hot Dog Sausages	1	-	1
Total	96	1	97

Of 97 samples taken it will be seen only one was "not satisfactory". This was a sample of Sliced Green Beans, which were found by the purchaser to contain a piece of string. It was not possible to determine where this piece of string came from but it is not improbable that it had been used on the farm in connection with the growing of the beans. The evidence was not sufficient to justify legal proceedings and a verbal caution was issued to the Manufacturers.

At the request of the Health Committee examinations were made of a proprietary disinfectant and of a chemical substance which was said by its manufacturer to be "the same" as a branded product. It was intended, if this claim proved to be correct, to use this chemical in the place of the branded product, since it was considerably cheaper than its branded competitor.

The Public Analyst examined the two samples with this object in mind and said that in his view the chemical was so similar to the branded preparation as to be a perfectly acceptable substitute; if not identical they were so close together as to make one useable for the other. This information was communicated to the Welfare Committee and I understand they have ceased to use the proprietary product with considerable saving to the County.

There is a vast trade in "Individual Fruit Pies"; small jam filled pies served in cartons at a cost of 8d. During the year one brand of these pies appeared in a new and attractive box, covered with illustrations of quantities of luscious fruit and bearing the legend "New! Now even fruitier". As a result of this, analysis was made of one of the old type pies and one of the new "Fruitier" variety. The Analyst reported that the new pack did in fact contain more fruit and that the claim was justified.

There has for some time, been much public concern in the possibility that the various sprays which are used on fruit trees could contaminate the fruit and so harm the person who eats fruit. This is a most difficult and complex subject but, whilst the effects of residual build up in the body of such pesticides as Aldrin cannot be easily assessed, there does seem to be every reason for a Food and Drugs Authority such as this to examine at least a small proportion of the fruit being sold to ensure that it is free from the more harmful poisonous sprays which are used on fruit. As a result during the year locally grown apples and plums were examined; all were found to be free from residual pesticides. It may be reassuring to the public at large to know that this has been the experience of other Counties who have done this work and there has been no evidence of wide spread misuse of sprays.

During the year a sample survey was made of the amount of Jam to be found in Jam Doughnuts and a total of seven samples were obtained from Huntingdon and the Soke and the amount of Jam was found to vary from 2.18% to 7.48%.

Of course, there are no standards for the amount of jam in a doughnut but purchasers expect a reasonable quantity. Jam doughnuts are certainly purchased

for the jam and no-one would buy them if they knew they were to contain only a little jam. The two samples obtained in the Soke were found to contain a reasonable quantity of jam and representing good value; the manufacturer with only 2.18% of jam said that he would increase his jam content.

The wide range of other samples tested were found to be correct.

EAST ANGLIA CLEAN MILK BOTTLE CAMPAIGN

The County Council has continued to support the East Anglian Clean Milk Bottle Campaign. Most of the trouble with milk today comes not from unsound milk but from a bottle which is found to be dirty or to contain a "foreign body". It is of course an absolute duty of all Dairies to wash and thoroughly clean their bottles. To this end they carefully sort and inspect returned bottles; each is then put through a complicated and automatic washing machine using both detergents and hot and cold rinses and the bottles are inspected again at this stage. When it is realised that the production of milk at an average sized dairy is over a million bottles a week it will be understood how, even with all these precautions, occasionally a bottle which is not satisfactory is not detected and is refilled.

The County Council as a Food and Drugs Authority can Institute Proceedings in these cases. However, when a dairy is doing all it can to avoid this trouble and one is unable to suggest any method of improving their system, a prosecution appears to be pointless. All these foreign bodies which are found in milk bottles are put there by a previous user. What is needed is some means of persuading the few members of the public who abuse milk bottles not to do so; if everyone used milk bottles only for milk and made sure they were rinsed and returned daily, the problem would disappear. As it is, at present milk bottles are used for Home Perm Lotions, Paraffin, Paint and Cement; they are kept on such places as building sites for weeks on end and then returned in a condition which makes it impossible to wash them. Milk bottles have been found to contain cardboard, hairgrips, pieces of straw and hardened cement.

The obvious solution of cartons does not seem to be realisable at present since the cost of cartons is greater than that of bottles. In the meantime one can only ask that the small percentage of the public who misuse milk bottles will desist, and the milk roundsmen who collect the empties will take the opportunity to remove dirty bottles from circulation.

MILK SAMPLING FOR BACTERIOLOGICAL AND BIOLOGICAL TESTING

Milk is sampled to check its quality and composition; it is also tested to see that it is properly pasteurised and has good keeping qualities. 26 such samples were taken in the County; three failed the test.

In two of these cases the cause was trouble with the washing plant at the Dairy; difficulties with the boiler had resulted in an unsatisfactory supply

of steam and once the boiler was repaired the Dairy in question, resumed its previous satisfactory performance. Many repeat samples proved to be satisfactory. In the third case the reason for the failure was never ascertained but repeat samples were satisfactory.

ANTIBIOTICS IN MILK

Recently much concern has been shown in the presence of antibiotics such as penicillin in the milk supply. This is dangerous on two counts; it can lead to people building an immunity to antibiotics which is not desirable and it can cause illness in certain persons who are allergic to antibiotics. During the year 35 samples were taken and in one instance only was the presence of antibiotics detected. The Farmer concerned was interviewed and stated that he had used antibiotics but had afterwards with-held the milk for 48 hours, as recommended by the Milk Marketing Board. Further samples from this Farmer proved satisfactory.

GENERAL

A report such as this tends to dwell on those things which were found to be unsatisfactory. The Composition and Quality of Food in this area reaches a very high standard which is shown by only one sample in 97 being found to be unsatisfactory. It is now almost unknown for a serious case of Adulteration to occur and the selling of milk to which water has been added has almost disappeared.

In conclusion, I should like to thank the Clerk of the Council, Mr. E. P. Smith, and his staff for their assistance; particularly I would thank Dr. Nisbet for his interest and advice at all times. My thanks are also due to members of the Prevention of Illness Sub-Committee under their Chairman, County Alderman Adams, for their enthusiastic support in this work.



